



# State & Territory Application

States and Territories applying for the Guarantee must complete this form and return it to the Scheme Administrator. Information about the requirements for completing and submitting an Application is available in Schedule 1 of the Scheme Rules. Enquiries relating to the completion of this form can be directed to the Scheme Administrator on 1800 013 806.

**1** Date of Application

**2** Name of Applicant

**3** Contact Name

**4** Position

**5** Postal Address

**6** E-mail Address

**7** Telephone No.

Facsimile No.

**8** Applicant Credit Rating

Moody's

Standard & Poor's

Fitch

**9** What does this application cover?

Short-term liabilities (<15 months)

Long-term liabilities (15 to 180 months)

**10** Statements and Legal Documentation Required

	Included	Previously Supplied
Executed Counter-Indemnity	<input type="checkbox"/>	<input type="checkbox"/>
External legal opinion on executed Counter-Indemnity	<input type="checkbox"/>	<input type="checkbox"/>
Fee letter	<input type="checkbox"/>	
Details of liabilities	<input type="checkbox"/>	

**11** Signature of Authorised Person as outlined in 13.1.1 of the Scheme Rules

Name

Signature

Date